Annual Report for the year: 2020 Limited Liability Company

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FILEDSTAMP

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 154860		2. Exact name of the Limited Liability Company  LIBERALIS, LLC				
3. NAICS Code	4. Brief de	Brief description of the character of business conducted in Rhode Island     INVESTMENT, OWNERSHIP AND MANAGEMENT OF REAL ESTATE				
531390						
5. State of Formation RI						
6. Principal Office Address			City	State	Zip	
872 SMITHFIELD AVENUE			LINCOLN	RI	02865	
7. Mailing Address of Limited	Liability Compa	any and Name o	r Title of Contact Person			
Contact Name PETER A. LAWRENCE			Contact Title PRESIDEN	Contact Title PRESIDENT		
Street Address 872 SMITHFIELD AVENUE			City LINCOLN	State RI	Zip 02865	
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
				Check the box to	indicate an attachment	
9. Resident Agent in Rhode Is	sland. This infor	nation is currently	of record with the Department of S	tate. Changes require fili	ng Form 642.	
Under penalty of perjury, I o statements, and that all sta	declare and afi	firm that I have	examined this report, includi	ng any accompanyin	g schedules and	
Name of Authorized Person				Date		
PETER A. LAWRENCE					20/20	
Signature of Authorized Person		SIG	N DOCUMENT HERE	_ <del></del>	<del></del>	
SIGN DOCUMENT HERE						

## MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov